

**Women's Knowledge, Expectations and Experience of
Induction of Labour
and the Association with Maternal Anxiety**

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A thesis submitted in accordance with the requirements
for admission to the degree of
MASTER OF MIDWIFERY (HONOURS)

UNIVERSITY OF TECHNOLOGY, SYDNEY

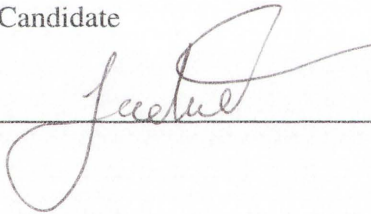
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A handwritten signature in cursive script, appearing to read 'J. C. C. C.', is written over a horizontal line.

ACKNOWLEDGEMENTS

This research and the production of a thesis has taken me on a very challenging but rewarding journey. I have learnt many things during this project and there are many people to acknowledge and thank for their assistance and guidance in completing my research study.

Firstly I would like to especially thank Maralyn Foureur, as my supervisor for your tireless enthusiasm and standing beside me on the journey. Your speedy wonderful feedback on my work has been particularly appreciated. Thank you for your support and encouraging words when I needed them most. There have been many times when I did not know how to express how grateful I am. To Caroline Homer, my co-supervisor, thank you for your optimism and belief in my ability, the study and its importance to society and health care. I am extremely grateful for the opportunity to have you both as supervisors and mentors.

I would like to thank Georgina Luscombe for her great statistical help and valuable suggestions throughout data analysis. My thanks also go to Julie Swain, whose insightful comments are greatly appreciated. Gratitude is extended to all maternity managers and staff at Blacktown Hospital for their support, time and assistance.

Thank you to all the women for their participation and generously sharing their pregnancy and birthing experiences and their valuable comments, in the hope of improving health care for women and their infants.

Thank you to Mum, you have always supported me in everything I have done and for this I am so grateful. Thank you to my daughters, Sogand and Niki, your support means everything.

My acknowledgement and special thanks must go to Hamid, my best friend, my lover and my soul mate. I thank you for your patience, understanding and unending belief in me, for your constant support and encouragement, and for being the person who makes life so worthwhile.

ABSTRACT

Induction of Labour (IOL) is one of the fastest growing procedures in childbirth in the developed world with one in four women now being induced. The primary purpose of this study was to further develop the understanding of women's knowledge, expectations and experiences of IOL in order to identify whether women's views may be contributing factors to the increasing rate of IOL. A descriptive and correlational study design, using pre and post IOL surveys, captured the views of a convenience sample of pregnant women booked for any type of IOL at Blacktown Hospital in 2009 and 2010. Consenting women were given self-administered, pre and post-IOL questionnaires and the Spielberger State-Trait Anxiety Inventory. One hundred and nine women experienced IOL and completed both pre and post IOL surveys; of these, 98 linked surveys were eligible to be analysed using SPSS v 18. Both simple descriptive and multivariate analyses were undertaken.

The majority of participants (85.7%) acknowledged they agreed to have an IOL because they were worried about problems with their baby if the pregnancy continued. Most (59.1%) acknowledged a midwife as their most important care provider as well as the most common source of information (61.2%). Although 96.9% of women expressed the importance of information concerning IOL, only 75% were satisfied with the information they received prior to the process. While the majority of participants (97.9%) were satisfied with the care they received from midwives, overall, 13.4% did not have a satisfying IOL experience.

More than 21% of women expected to give birth within six hours and only 15% of participants expressed the length of their labour was around what they expected. While 7.1% came with no expectation regarding labour pain, 67.8% rated their pain as 'much more/ more painful' than they expected.

These results revealed that many women did not have realistic expectations of IOL. Satisfaction with childbirth was higher for women who had a birth experience that was better than expected. In addition, there was a significant relationship between women's realistic expectations and their satisfaction with IOL. However a positive relationship between women's knowledge and their satisfaction with IOL was not found in this study. There was a significant relationship between women's level of knowledge and

their State anxiety level before undergoing IOL. Furthermore women who had more realistic expectations were less anxious after experiencing IOL. Being well informed by the midwife was the strongest predictor for satisfaction in this study ($p<0.001$). In addition those participants who had more realistic expectations were less anxious after their IOL.

The results of this study add to our understanding of women's wishes and views towards induction of labour within an Australian context. The importance of being well informed by the midwife suggests a professional responsibility to ensure that women are provided with accurate and timely information regarding IOL in order to set realistic expectations to achieve a positive childbirth experience.

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ABBREVIATIONS

ACOG	American College of Obstetricians and Gynaecologists
AFE	Amniotic Fluid Embolism
ARM	Artificial Rupture of Membranes
AWHONNC	Association of Women's Health, Obstetric and Neonatal Nurses of Canada
CI	Confidence Intervals
CS	Caesarean Section
CTG	Cardiotocograph
DIC	Disseminated Intravascular Coagulopathy
DOCs	Department of Community Services
EFM	Electronic Fetal Monitoring
FHR	Fetal Heart Rate
GP	General Practitioner
IOL	Induction Of Labour
NICE	National Institute for Health and Clinical Excellence
NICU	Neonatal Intensive Care Unit
NHS	National Health Service
NSW	New South Wales
NSWDH	New South Wales Department of Health
PG	Prostaglandin
PPH	Post Partum Haemorrhage
PTSD	Post Traumatic Stress Disorder
OR	Odds Ratios
RANZCOG	The Royal Australian and New Zealand College of Obstetricians and Gynaecologists
RCOG	Royal College of Obstetricians and Gynaecologists
RDS	Respiratory Distress Syndrome
SPSS	Statistical Package for Social Sciences
SROM	Spontaneous Rupture of Membranes
STAI	State Trait Anxiety Inventory
SWAHS	Sydney West Area Health Service

UK	The United Kingdom
US/USA	The United State of America
WHO	World Health Organization